MAIL TO: ...
Office of the Attorney General Régistry of Charitable Trusts
P.O. Box 903447
Sacramento, CA 94203-4470

STREET ADDRESS: 1300 | Street Sacramento, CA 95814 Telephone: 323-5079

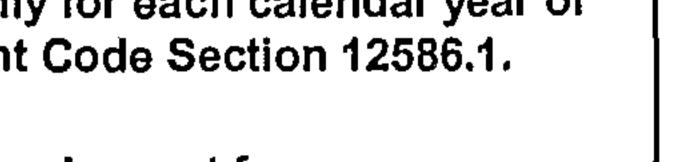
WEBSITE ADDRESS: http://ag.ca.gov/charities/

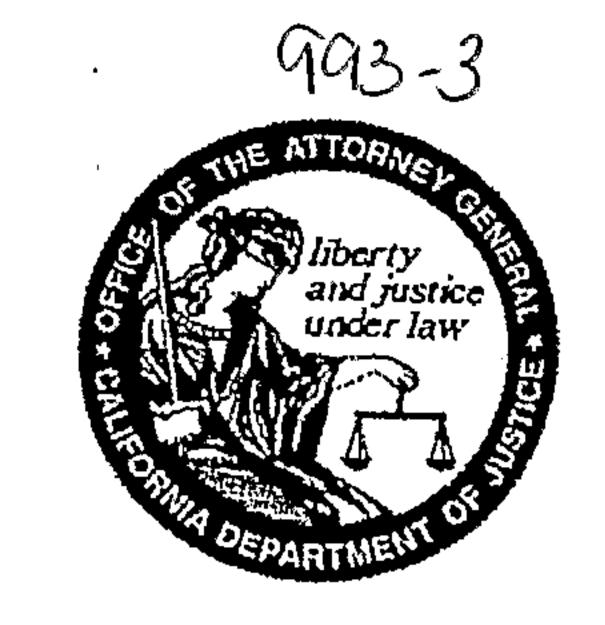
COMMERCIAL FUNDRAISER FOR CHARITABLE PURPOSES VEHICLE DONATION PROGRAM

ANNUAL FINANCIAL REPORT FOR 20<u>0.3</u>

(California Government Code Section 12599)







An annual financial report must be filed for each event for each charity solicited for during the previous calendar year.

Name and Address of Commercial Fundraiser:	Name and Address of Charitable Organization:
	CT No F.E.I.N. 95-3428475
993	
AMERICAN BEST AUTO DONATION	HIGH WESPRT ("HIRCH
17229 GASLINE ROAD	Name of charity
VICTORVILLE, CA 92392	14545 HOOK BOILEVARD
	Address/of charity
	MCTORVILLE CA 92394
	City, State, and ZIP code of charity
Figures from (check one): National Campaign California Campaign	N 1SI 2003 1 DAT 315I 2003
HITO LONATION held (on) (from) IN	(Date or dates must be shown)
1. REVENUE	GA. M.
A. Car/Truck Sales	A.
B. Boat Sales	B.
C. Real Estate Sales	
D. Other sources: "(Specify)	
a	Da
b	
C	Dc.
d	Dd. ' \
E. TOTAL REVENUE	90,00 E.
2. EXPENSES	
A. Fees or commissions paid by commercial fundraiser	<u>22,50</u> A.
B. Salaries	
C. Payroli taxes	· C.
D. Employee benefits	D.
E. Towing	<u> 40,00</u> E.
F. Vehicle repairs	<u></u>
G. Parts	
H. DMV Fees	<u> </u>
I. Appraisals	
J. Detailing	,
K. Advertising	<u>5.00</u> K.
L. Telephone	
M. Other expenses: (Specify)	•
a	Ma.
b.	Mb.
C	Mc.
d	Md. / /7 /
N. TOTAL EXPENSES	$\frac{6/50}{N}$
· · · · · · · · · · · · · · · · · · ·	į

PROTECTION

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Attorney General's Trusts

Registry of Charitable Trusts

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COMMERCIAL FUND-RAISER FOR CHARITABLE PURPOSES - VEHICLE DONATION PROGRAM

ANNUAL FINANCIAL REPORT 20<u>03</u> (California Government Code Section 12599)

. Distribution or net to charitable organization)n	22,50
Less additional expenses relating to opera	tion of vehicle donation program paid by cha	arity 4.
Total amount charity realized from operation	on of vehicle donation program	<u>22,50</u> 5.
	or owner of the commercial fundraiser have	
□ Yes Ø No <u>If "yes," complete</u>	the following:	
Name of officer, director, partner or owner of commercial fundraiser	Name and address of charitable organization	Relationship of officer, etc. to charitable organization
	m m m m m m m m m m m m m m m m m m m	
•		
(b) For each affiliation identified in 6(a), nder penalties of perjury, I declare that I have nd to the best of my knowledge and belief, it is	attach copy of the contract between the cone examined this report, including accompany	
		MINISTER 1-12-52
nature of authorized officer (commercial fundraiser)	Printed name	<u>OWNER</u> /-/5-04 Title Date
is report must be signed by two officers of the cha	ritable organization for verification.	
		: bas **
gnature/of authorized officer/director (charity)	Printed name	Title Date
gnature of authorized officer/director (cnarity)	Printed name	Mactor of Office Adnus ! Title Date
gnature or authorized onjoge@unector (charity)		-11090

CT-2VCF (8/2003)

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